

St. Croix Montessori School is excited to offer Summer Adventures for Kids (Ages 6-12)

Passport to Latin America

June 18-22, 2012

Come and experience the vibrant cultures of Latin America without ever getting on an airplane! During this week-long *vacación*, we will explore the food, music, dance and art of various South and Central American countries. Bring your curiosity and don't forget to pack your appetite for fun and adventure.



Wilderness Explorers

July 23-27, 2012



Join us for a truly wild experience this week as we learn the tricks and the trades of what it takes to survive in the wild. Learn how to build a survival shelter, start a one-match fire, and find wild edibles. We will also learn how to find tracks, scat and other signs of animals when we visit the Wildlife Science Center for a unique and up-close encounter with wolves, black bears, coyotes and more. Have you ever been Geocaching? If not, you will this week!

Amusement Park Adventure

August 6-10, 2012

Using Kinex and Legos, we will build a miniature amusement park, have a hand at making cotton candy, taffy, popcorn and more delectable items. Join us for this summer adventure .



ST. CROIX
Montessori School

Unlimited Potential. Individual Success.

177 Neal Avenue N.
Stillwater, MN 55082
651-436-2603

info@stcroixmontessori.org




2012 Summer Camp Registration Form

(ages 6 - 12 years old)

Please complete this form and return it along with the complete fees by May 18, 2012. After care will be billed at the end of each month. **We reserve the right to cancel a session if fewer than 8 campers enroll.**

Please check the camps and any before/after care needed.

Camp Dates:	Camp Name:	Full Day 9:00 - 4:00 \$235 per week	Before Care (8:00 - 9:00) \$6.50 per hour	After Care (4:00 - 5:30) \$6.50 per hour
June 18-22	Passport to Latin America			
July 23 - 27	Wilderness Explorers 			
August 6 - 10	Amusement Park Adventure			
Balance Due:				

Please initial and sign below.

I give my consent for my child to participate in any field trips associated with the SCMS Summer Camp program. I/We give permission for my/our child(ren) to be photographed and for this photo to be published by the local press or by St. Croix Montessori School.

Parent/Guardian Signature: _____ Date: _____

EMERGENCY INFORMATION

Child's Name _____

Parent Name _____ Cell Phone _____

Street Address _____ Work Phone _____

City, State, Zip _____ Home Phone _____

Parent/Emergency Contact _____ Cell Phone _____

Street Address _____ Work Phone _____

City, State, Zip _____ Home Phone _____

Emergency Contact _____ Cell Phone _____

Street Address _____ Work Phone _____

City, State, Zip _____ Home Phone _____

Physician _____ Phone _____

Street Address _____

City, State, Zip _____

Dentist _____ Phone _____

Street Address _____

City, State, Zip _____

Any known ALLERGIES: _____ Date of Last Tetanus Shot: _____

Parent Signature _____ Date _____